Application for Pardon or Commutation

MINNESOTA BOARD OF PARDONS

1450 Energy Park Drive, Suite 200, St. Paul, MN 55108 phone: 651-361-7171; fax 651-603-6770 website: https://mn.gov/doc/about/pardon-board/



The Board of Pardons may grant a pardon or commute the sentence of any person convicted of any offense against the laws of the state. A <u>pardon</u> is an act of forgiveness which exempts the convicted person from the punishment imposed by law. A <u>commutation</u> is the substitution of a lesser penalty for the original sentence that was judicially imposed.

Instructions

- 1. Complete all sections of this application. Sign the last page and include the county and state in which the application is signed. Omissions or false statements may constitute grounds for denial of a pardon or commutation.
- 2. If your application is based on "institutional adjustment," the Department of Corrections will provide the Board with an institutional adjustment report.
- 3. Submit the application, and any attachments you wish to include, using one of the following methods:
 - a. mail the application to the Board of Pardons at the above address;
 - b. scan and e-mail the application to mnboardofpardons@state.mn.us; or
 - c. fax the application to 651-603-6770.
- 4. We will acknowledge receipt of your application.

Applicant Identification Information						
Last name	First name	Middle name				
Date of birth	Place of birth	Social security number				
Facility and OID# or current address						
City	State	Zip code				
Telephone	Driver's license number	Issuing state				

Full name	Date of birth				
DATA PRIVACY NOTICE Be advised that the information you provide as part of this application, and any relevant materials found by Board of Pardons staff in investigating your application, will be discussed at the public meeting of the Board of Pardons and that these records are open to public inspection per Minn. Stat. § 638.07. Failure to provide the requested information may affect the processing of your application and result in the denial of a pardon or commutation.					
<u>Use of Other Names</u> List every name by which you have been known including conviction name, maiden name, former married name, nicknames, and all aliases.					
1.	2.				
3.	4.				
5.	6.				
Pardon or Commutation Application History					
Have you previously applied for a pardon or commutation in Minnesota? Yes No	yes, please list the dates you applied.				
<u>Convictions</u>					
 Although the Board of Pardons has jurisdiction over Minnesota convictions only, you must include all convictions in this application, including those in other states or countries, and all violations of conditions of release including supervised release, conditional release, and parole. You must provide the date, county of conviction, and whether you pled guilty to the crime. If you are uncertain about any convictions, please explain as best you can. You may review Bureau of Criminal Apprehension records at https://dps.mn.gov/divisions/bca (651-793-2400); records from the courts; police departments; and the Minnesota Department of Motor Vehicles https://dps.mn.gov/divisions/dvs. Court records can be obtained at http://www.mncourts.gov. Specify whether you are seeking a pardon or commutation from the board. 					
❖ You must notify the board if you are charged with a new offense after you submit your					

Conviction Information Provide a detailed description of every offense for which you are seeking a pardon or commutation starting with				
your most recent conviction. If more than three convictions, attach additional sheets using the same format.				
Court file number	Date of conviction	County of conviction	Pardon Commutation	
Offense	Sentence	Plea	Discharge date	
Trial judge	Prosecuting attorney	Defense attorney	Victim	
Amount of court ordered restitution, fines, or fees	Amount paid	Amount still owed	If you paid all restitution for this conviction, attach documentation that confirms this.	
Did you challenge this conviction?	Yes If yes, how?	Appeal of conviction Appeal of sentence	Post conviction action Habeas corpus action	
Grounds for challenge	Outcome	Attorney name (also addrewas within the last 5 years	ess and phone number if action)	
Description of offense.				
	case, provide a brief statement ressible to you or to the best o		nony presented at your trial, to the	

Conviction Information Provide a detailed description of every offense for which you are seeking a pardon or commutation starting with				
your most recent conviction. If more than three convictions, attach additional sheets using the same format.				
Date of conviction		County of conviction	Pardon Commutation	
Sentence			Plea	Discharge date
Prosecuting attorney			Defense attorney	Victim
Amount paid			Amount still owed	If you paid all restitution for this conviction, attach documentation that confirms this.
☐ Yes ☐ No	If yes, how?		Appeal of conviction Appeal of sentence	Post conviction action Habeas corpus action
Outcome or current status			Attorney name (also address and phone number if action was within the last 5 years)	
If you went to trial in this case, provide a brief statement of the evidence and testimony presented at your trial, to the extent the information is accessible to you or to the best of your recollection.				
	Date of con Sentence Prosecuting Amount pa Yes No Outcome of	on of every offense for various. If more than three con Date of conviction Sentence Prosecuting attorney Amount paid Yes If yes, how? Outcome or current sta	on of every offense for which If more than three conviction Date of conviction Sentence Prosecuting attorney Amount paid Yes If yes, how? Outcome or current status Case, provide a brief statemen	on of every offense for which you are seeking a parden. If more than three convictions, attach additional sheet Date of conviction Sentence

Conviction Information					
Provide a detailed description your most recent conviction					on or commutation starting with ts using the same format.
Court File Number	Date of Conviction		County of Conviction	Pardon Commutation	
Offense	Sentence			Plea	Discharge Date
Trial Judge	Prosecuting Attorney		Defense Attorney	Victim	
Amount of Court Ordered Restitution, Fines, or Fees			Amount still Owed	If you paid all restitution for this conviction, attach documentation that confirms this.	
Did you challenge this conviction?	☐ Yes ☐ No	If yes, how?		Appeal of conviction Appeal of sentence	Post conviction action Habeas corpus action
Grounds for challenge	Outcome or current status		Attorney name (also address and phone number if action was within the last 5 years)		
Description of offense.					
If you went to trial in this extent the information is acc					mony presented at your trial, to the

Conviction Information				
State all other convictions for which you are <u>not</u> seeking a Pardon or Commutation for. If you more convictions than				
	ttach additional sheets using th			
Offense	Date of Offense	Sentence		
Date of Conviction/Cour	t file number	County/State of Conviction		
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Offense	Date of Offense	Sentence		
Date of Conviction/Cour	t file number	County/State of Conviction		
Offense	Date of Offense	Sentence		
Date of Conviction/Cour	t file number	County/State of Conviction		
Offense	Date of Offense	Sentence		
Date of Conviction/Cour	t file number	County/State of Conviction		
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Offense	Date of Offense	Sentence		
Date of Conviction/Cour	t file number	County/State of Conviction		
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Offense	Date of Offense	Sentence		
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Date of Conviction/Cour	t file number	County/State of Conviction		
Offense	Date of Offense	Sentence		
		Selicine		
Date of Conviction/Cour	t file number	County/State of Conviction		

Grounds Upon which Relief is Sought State the rationale for the relief you are seeking from the Board by checking the appropriate boxes.				
Crime and trial	☐ innocence ☐ entrapment ☐ inadequate counsel ☐ unfair trial ☐ prejudicial jury			
Sentence	excessive in light of the plea bargain or in comparison to that given an accomplice harsh in light of criminal history			
Institutional adjustment	The Department of Corrections will provide information to the Board. model prisoner unusual educational achievements religious conversion recovery from chemical dependency threats to life while in prison no chance for rehabilitation in prison setting			
Personal situation	 ☐ medical complications ☐ total rehabilitation ☐ desperate family need 			
Explain why you be	lieve the board should grant you a pardon or commutation.			

<u>In</u> One or two people may speak in s		ng on your Behalf
One of two people may speak in s	upport or your applic	ation at the hearing.
Name and address of person who will speak	How you are associated	Brief summary of information to be presented
orrect. I authorize any agen	cy or individual in	ything I have stated in this document is true and any state to provide the Minnesota Board of
		ion including records of arrests and convictions clude information previously subject to an order
f expungement.		
Applicant Signature		Date
County		State